

1001642

APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART. UNIT	EXAMINER
		414		36521	

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NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED	
		Assistant Examiner	Total Claims
			Print Claim for 0.0
ISSUE FEE		DRAWING	
Amount Due	Date Paid	Photo Drawg.	Fig. Drawg.
		Print Fig.	
<input type="checkbox"/> TERMINAL DISCLAIMER		Primary Examiner	Application Examiner
		PREPARED FOR ISSUE	
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